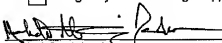


AMENDMENT TRANSMITTAL LETTER					Docket No. HOI-14302/16	
Application No. 10/560,519-Conf. #5664		Filing Date March 20, 2006		Examiner M. C. Henry		Art Unit 1623
Applicant(s): Inge Dorthe Hansen						
Invention: TREATMENT OF SYMPTOMS ASSOCIATED WITH BACTERIAL VAGINOSIS						
TO THE COMMISSIONER FOR PATENTS						
Transmitted herewith is an amendment and a petition for extension of time in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	32	- 26 =	6	x 25.00	150.00	
Independent Claims	4	- 3 =	1	x 105.00	105.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						
Other fee (please specify): Extension for response within first month					60.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					315.00	
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity						
<input type="checkbox"/> No additional fee is required for this amendment.						
<input type="checkbox"/> Please charge Deposit Account No. <u>07-1180</u> In the amount of \$ _____. A duplicate copy of this sheet is enclosed.						
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.						
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>07-1180</u> as described below. A duplicate copy of this sheet is enclosed.						
<input checked="" type="checkbox"/> Credit any overpayment.						
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.						
 Mehdi Ganjeizadeh Attorney/Agent Reg. No.: 47,585				Dated: <u>May 7, 2006</u>		
GIFFORD, KRASS, SPRINKLE, ANDERSON & CITKOWSKI, P.C. 2701 Troy Center Drive, Suite 330 Post Office Box 7021 Troy, Michigan 48007-7021 (248) 647-6000						